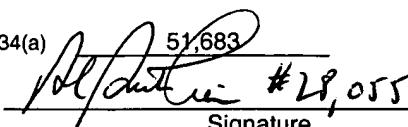




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<b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b>		Docket No. (Optional) 204552021700														
<p style="text-align: center;">In re Application of      Tetsuyoshi INOUE</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Application Number</td> <td style="width: 50%;">Filed</td> </tr> <tr> <td>09/987,010</td> <td>November 13, 2001</td> </tr> <tr> <td colspan="2" style="text-align: center;">For: SEMICONDUCTOR LASER MANUFACTURING METHOD AND SEMICONDUCTOR LASER</td> </tr> <tr> <td style="text-align: center;">Art Unit</td> <td style="text-align: center;">Examiner</td> </tr> <tr> <td style="text-align: center;">2828</td> <td style="text-align: center;">Tuan N. Nguyen</td> </tr> </table>	Application Number	Filed	09/987,010	November 13, 2001	For: SEMICONDUCTOR LASER MANUFACTURING METHOD AND SEMICONDUCTOR LASER		Art Unit	Examiner	2828	Tuan N. Nguyen						
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2828	Tuan N. Nguyen															
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.</p>																
<p>The requested extension and appropriate non-small-entity fee are as follows (check time period desired):</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 10%;"><input checked="" type="checkbox"/></td> <td>One month (37 CFR 1.17(a)(1))</td> <td style="width: 10%; text-align: right;">\$ 110.00</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Two months (37 CFR 1.17(a)(2))</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Three months (37 CFR 1.17(a)(3))</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Four months (37 CFR 1.17(a)(4))</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Five months (37 CFR 1.17(a)(5))</td> <td style="text-align: right;">\$ _____</td> </tr> </table>		<input checked="" type="checkbox"/>	One month (37 CFR 1.17(a)(1))	\$ 110.00	<input type="checkbox"/>	Two months (37 CFR 1.17(a)(2))	\$ _____	<input type="checkbox"/>	Three months (37 CFR 1.17(a)(3))	\$ _____	<input type="checkbox"/>	Four months (37 CFR 1.17(a)(4))	\$ _____	<input type="checkbox"/>	Five months (37 CFR 1.17(a)(5))	\$ _____
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<p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ _____.</p> <p><input type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input checked="" type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>03-1952</u></p> <p><del>I have enclosed a duplicate copy of this sheet.</del> Fee Transmittal form (PTO/SB/17) is attached to this submission in duplicate.</p>																
<p>I am the <input type="checkbox"/> applicant/inventor.</p> <p><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).</p> <p><input type="checkbox"/> attorney or agent of record. Registration Number _____</p> <p><input checked="" type="checkbox"/> attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a) <u>51,683</u></p>																
<u>September 20, 2004</u> <u>Date</u>		 <u>Brian N. Fletcher</u> <u>Signature</u> <u>FBN</u> <u>Brian N. Fletcher</u> <u>Typed or printed name</u>														
<p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below</p>																
<input type="checkbox"/> Total of <u>1</u> forms are submitted.																